dnodenal ulcers in older children. The diagnosis of duodenal ulcer is difficult and usually not made. Dnodenal ulcer may be successfully treated by operation.

Ulcer of Lesser Curvature of Stomach.—FABER (Lancet, January 14, 1922, p. 65) says that gastrie uleer in the corpus of the stomach (on the lesser enryature) is commoner in women than in men. Juxtapyloric nleer is more frequent in men than in women. Gastrie nleers are chiefly ulcers of the corpus in women, and juxtapylorie ulcers in men. Statisties of postmortem examinations show that gastrie alcer is commoner in women than in men. Uleer of the corpus may therefore be assumed to be the more frequent variety. On account of their symptoms and course, juxtapyloric ulcers make easier subjects for surgical treatment than uleers of the corpus. For this reason, statistics of operative material so often show a preponderance of men. Uleer of the corpus, which might be called the women's uleer, has a more favorable course than the inxtapylorie. It heals more readily and the raw ulcer found postmortem has more often than the juxtapylorie, the character of a fresh aente uleer. Uleer of the corpus often lacks the symptom-complex so characteristic of the inxtapyloric aleer, especially the late pains and the hypersecretion. This obtains in the case of recent and chronic alcer of the corpus. We may presume that a large number of alcers of the corpus as a rule in women make their appearance and get well again without the diagnosis "gastrie ulcer" being made.

Neurofibromyxoma Treated by Conservative Operation.—Gatch and Rytchey (Ann. Surg., 1922, 75, 181) say that various authors believe that benigh fibrous or fibromyxomatous tumors of nerve sheaths may undergo malignant degeneration into sarcoma. If the tumor is of long duration, it is not likely to be malignant. The presence or absence of motor or sensory paralysis is a most valuable point. A nerve will withstand a really remarkable amount of stretching or pulling from a benign growth but is quickly destroyed by the infiltration of its substance by a sarcoma. The gross appearance is significant. The encapsulation of the fibrous portion of the tumor and the possibility of shelling the same from the center of a nerve trunk would seem to be strong evidence of a benign growth, as is the lack of encapsulation with fixation of the growth to the contiguous structures strong evidence for sarcoma. The authors feel that microscopical study to the exclusion of other factors is misleading.

Ruptured Spleen.—METCALFE and FLETCHER (Ann. Surg., 1922, 75, 186) say that the healthy spleen may rupture spontaneously or from comparatively slight trauma. The symptoms at first may be slight; some dizziness, mansea or vomiting with restlessness and indefinite abdominal pains or the immediate symptoms may be severe intranbdominal hemorrhage depending upon this contingency whether the capsule of the spleen has raptured or remained intact, forming a large subenpsular hematoma. In the authors' cases an agonizing pain was felt in the left shoulder. They feel that it is of value in diagnosis with the only safe treatment.

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UNDER THE CHARGE OF

THOMPSON S. WESTCOTT, M.D., AND ALVIN E. SIEGEL, M.D., OF PHILADELPHIA.

Studies of Infant Feeding-A Bacteriological Study of the Feces and the Food of Normal Babies Receiving Breast Milk.—Brown and Bos-WORTH (Am. Jour. Dis. Children, 1922, 23, 243) found that direct smears from the stools of normal breast-fed babies present a practically constant picture, which is characterized by an almost complete dominance of the bifidus group. In this picture eoeci and Gram-negative organisms are indistinguishable or are present in very small numbers. This proportion of bacterial types may be changed by abnormal physiologic conditions. A baby who has been on cow's milk formula for several days, although originally breast-fed, may show bacteriologically the effects of this diet even as long as four weeks after the continuous ingestion of breast milk. This is indicated from the smears from the feces by a larger number of coeci and Gram-negative bacilli than is typically found as characteristic of a normal breast-milk stool. If a cow's milk formula is used before the third day after birth, and breast milk is used thereafter, the establishment of feeal types of bacteria follows the course of the normal nursling very closely. From the study of anaërohie cultures it was found that B. bifidus is also the dominant living type of organism in the feces of normal breast-fed infants. The proportion of types represented in the direct smears is closely paralleled by the proportion of types growing on anaërohie cultures. Aërobic cultures from the feces of normal nurslings typically showed a predominance of colonaërogenes groups. This may be lessened by abnormal physiologic conditions. While the study of the feeal flora of infants by anaërobic culture seems to be of great importance, aërobic cultures should also be used as a check to determine the presence of aërobic pathogenic bacteria or of adventitous bacteria. The results obtained from the study of drawn breast milk used for supplementary bottle feedings were inclusive, since no definite relationship could be established between the types of feeal bacteria and the hacteria isolated from the milk. was made more difficult because the babies had not had a monotonous diet which could be used as a check and because the majority of the organisms isolated from the milk were staphylococci and B, coli, which may be isolated from the normal stool. This study emphasized the fact that even a slight amount of handling pmy introduce types of bacteria into the feedings of a bottle-fed baby which a breast-fed infant would not ordinarily ingest. The study of the stools of normal breastfed babies has shown that a typical monotonous flora in the feces follows the continuous ingestion of breast milk. From the examination of the brenst milk it would seem that staphylococci may be ingested in all eases and that a lactic acid bacillus typical of B. bifidus may be frequently present in the milk as it comes from the breast. An important